# P05000134649

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	



10/04/05--01002--020 \*\*87.50





# **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

a,

### SUBJECT: SKMC, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

10-40-

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

S70.00 Filing Fee

. ...

Filing Fee & Certificate of Status

\$78.75	<b>\$87.50</b>
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	<b>DPY REQUIRED</b>

FROM: Melissa Carter Name (Printed or typed)	<mark></mark>
161 East Shipwreck Road Address	
Santa Rosa Beach, FI 32459 City, State & Zip	
(850) 687-0095	an Angla angla ang Angla ang angla ang ang ang ang ang ang ang ang ang

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 16, 2005

MELISSA CARTER 161 EAST SHIPWRECK ROAD SANTA ROSA BEACH, FL 32459

SUBJECT: SKMC INC. Ref. Number: W05000043102

We have received your document for SKMC INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

Your document will be retained in our pending file.

The corporate filing fees for profit and nonprofit, domestic or foreign are as follows:

Filing Fees	\$35.00
Registered Agent	
Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

If you have any further questions concerning your document, please call (850) 245-6955.

Suzanne Hawkes Document Specialist New Filings Section

Letter Number: 405A00057190

## **ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

SKMC Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

161 East Shipwreck Road. Santa Rosa Beach, FL 32459

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business organization and name recognition.

#### ARTICLE IV SHARES

The number of shares of stock is: 100

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Melissa Carter 161 East Shipwreck Road Santa Rosa Beach, Fl 32459

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Melissa Carter 161 East Shipwreck Road Santa Rosa Beach, FL 32459

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Melissa Carter 161 East Shipwreck Road Santa Rosa Beach, FL 32459

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

